# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 35°C15506

## CLAIMS AS FILED - PART I

TOTAL CLAIMS	(Column 1)	(Column 2)		
TOTAL CLAIMS	50			
FOR	25			
	NUMBER FILED	NUMBER EXTRA		
TOTAL CHARGEABLE CLAIMS	58 minus 20=			
INDEPENDENT CLAIMS	Jo minus 20=	28		
	minus 3 =			
MULTIPLE DEPENDENT CLAIM PE	RESENT			

#### SMALL ENTITY OTHER THAN TYPE \_\_\_\_ OR SMALL ENTITY

			OR	SMALL	ENTITY	1
	RATE	FEE	7	RATE	FEE	1
	BASIC FEE	355.00	OR	BASIC FEE		
	X\$ 9=		OR	X\$18=	684.	ĠG.
	X40=		OR	X80=	400.	
	+135=		OR	+270=	700.	
	TOTAL		OR	TOTAL	1794.	00

\* If the difference in column 1 is less than zero, enter "0" in column 2

### CLAIMS AS AMENDED - PART II

			(0-1			
Г		341	(Column 1) CLAIMS		(Column 2)	(Column 3)
<b>AMENDMENT A</b>			REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
2	Total		· <i>5</i> 8	Minus	.2-2	
Ž	Indepe	endent	. 8	Minus	30	
⋖	FIRST	PRESE	NTATION OF MI	II TIPLE DED	<u>X</u>	=6-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

### OTHER THAN SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 0-		OR	X\$18≃	
X40=		OR	X8Q=	
+135=		OR	+270=	
TOTAL ADDIT: FEE		OR ,	TOTAL ADDIT. FEE	

	4 B		(Column 1) CLAIMS REMAINING	V - C.	(Column 2) HIGHEST NUMBER	(Column 3)
	OMEN	Total	AFTER AMENDMENT		PREVIOUSLY PAID FOR	PRESENT EXTRA
I	MENDM	Independent	<u> </u>	Minus	••	=
I	5		NTATION OF MI	Minus	***	=
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

	100	,			
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
X\$ 9=		OR	X\$18=		
X40=		OR	X80=		
+135=		OR	+270=		
TOTAL OR TOTAL ADDIT, FEE					

10	Carry Salan	(Column 1)	1000	(Column 2)	(Column 3)	
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
ΙĮĒ	Total		Minus	**		
lly.	Independent		Minus		=	
₹	FIRST PRESE	NTATION OF MI	JLTIPI E DED	ENDENT OF THE	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

1		400:	٦.			
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	X\$ 9=		OR	X\$18=		
	X40=		OR	X80=		
	+135=		OR	+270=		
ADDIT, FEE OR TOTAL ADDIT, FEE						
fou	found in the appropriate box in column 1					

FORM PTO-875